| Check # | (Payable to the Township of Millstone) | Fee: \$50.00 |
|---------|--|--------------|
| Cash | | |

BUSINESS LICENSE REGISTRATION FORM

Please note that Business Licenses expire on June 30 of each calendar year.

| TOWNSHIP OF MILLSTONE 470 STAGE COACH ROAD MILLSTONE, NEW JERSEY 08510 | | | | | | |
|---|---|---------------|------------------|----------------------------------|--|--|
| Ві | usiness License Renewal: | | New Busines | ss License: Read next paragraph | | |
| | State Certifications and/or Licenses associated with Business | | | | | |
| | ☐ Floor Pla | n | | Certificate of Insurance | | |
| New Owners, Tenants, Renter, and Lessee's | | | | | | |
| A Continued Certificate of Occupancy (CCO) is required prior to the issuance of a New Business License. This is to assure proper maintenance of and compliance with applicable codes and ordinances for commercial buildings in order to further protect the safety and welfare of occupants and business invitees in commercial buildings. (Ord. No. 00-05, §I; Ord. No. 07-30 §I) | | | | | | |
| Included in a CCO, but not limited to, is an approval from the Monmouth County Health Department, Township of Millstone Building Department, Millstone Township Fire Department and Zoning Department. | | | | | | |
| 1. Bı | usiness Name: | | | | | |
| 2. Bı | usiness Address: | | | | | |
| 3. U | nit: Bl | ock: | _Lot: | Zone: | | |
| 4. N | ature of Business: | | | | | |
| 5. Ty | ype of product/service: _ | | | | | |
| 6. # | of Employees: | Square footag | e of space or bu | uilding: | | |
| 7. M | Iailing Address: | | | | | |
| 8. E- | -Mail Address: | | Tax : | ID #: | | |

| 9. | Business Number: | Fax Number: |
|------------|---|---|
| | Emergency Number: | Cell Number: |
| 10. | Applicant's Residential Address: | |
| 11. | has complied with the laws of the Unite | ents contained in this application are true and that the applicant ed States of America, the State of New Jersey and the ne providing regulations respecting the safety of persons who a place or thing registered. |
| | Applicant's Signature | _ |
| | Please note that Business | Licenses expire on June 30 of each calendar year. |
| | Property Tax | /Assessment Authorization Form |
| | 1 | Ordinance No. 99-10, adopted 6/2/99, sections 4-7.1 for business license) and 4-7.3 Responsibility of Owner. |
| <u>Pro</u> | operty Owners information and signa | ture required to secure a business registration. |
| Na | ame: | |
| Ad | dress: | |
| Pho | one Number: Pr | roperty Owners Signature: |
| <u>Of</u> | fice Use Only: | |
| Z | Zoning Building Dept. MTFD | MCHD NJDEP Other: |
| Ta | x Collector Information: | |
| The | e above mentioned property taxes or ass | essments are: Current Due/Delinquent D |
| For | Business License | |
| Dat | e: Daw | vn Mitchell, Tax Collector |